PTO/SB/80 (11-08)
Approved for use through 11/30/2011. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO I hereby revoke all previous powers of attorney given in the application identified in the attached statement under

37 CFR								
I hereby	appoint:							
Practitioners associated with the Customer Number:			100619					
OR								
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):								
	Na	ame	Registration	N	ame		Registration	
<u> </u>			Number				Number	
<u> </u>								
						0.0		
- ⊢								
L								
L_								
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents								
attached to	this form in accordar	nce with 37 CFR 3.73(b).						
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:								
	he address associate	ed with Customer Number:	100619					
OR								
Individual Name								
Address								
City	City		State			Zip		
Country								
Telephone Email								
T Graph to the				Cition				
Assignee Name and Address:								
Ikanos Communications, Inc.								
100 Schultz Drive								
Red Bank, New Jersey 07701								
A ========	I dhin farm danadh		- 27 OFF 2 72(L	VE PTO/CD/0				
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filled in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of								
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.								
and must identify the approach in which this Power of Attorney is to be filed.  SIGNATURE of Assignee of Record								
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee								
Signature	M	Lear Pour	<u></u>		Date [	1-2-	Loil	
Name			George Port	ugal	Telephon		345-7500	

The Confedence of Internation is required by 70 CPF 1.3.1, 1.2 and 1.3.

The Confedence of Internation is required by 70 CPF 1.3.1, 1.2 and 1.3.

The ISPTO 19 processes an application, Confedentiality is persound by 50 ISP Confedentiality is presented by 50 ISP Confedentiality is presented

Chief Legal Officer

Title